PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1480
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22000			(Signetore)			
					(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVENTO	FIRST NAMED INVENTOR		CONFIRMATION NO.	
10/529,182	03/24/2005	Eckhard Strofer		268012US0PCT	1878	

TITLE OF INVENTION: REPROCESSING OF REACTION MATERIAL DISCHARGED FROM PHOSGENATION REACTORS

APPLN. 1 TPE	SMALL ENTITY	ISSUE PER DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL PER(S) DUE	DATEDUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	06/04/2009	
EXAMINER		ART UNIT	CLASS-SUBCLASS]			
SACKEY, F	BENEZER O	1624	560-352000	-			
Change of correspondence address or indication of "Fee Address" (37 CFR 1.55). Change of correspondence address (or Change of Correspondence Address form PTOSBI 222) attached. Tee Address' indication (or "Tee Address' Indication form PTOSBI 27; Rev 0.3-02 or more recent) attached. Use of a Customer Number is recusived.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm thaving as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		era 2 McClell	Oblon, Spivak, McClelland, Maier Neustadt, P.C.	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patient. If an assignce is identified below, the document has been filled for recording as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.

(A) NAME OF ASSIGNEE

A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY

BASF Aktiengesellschaft Ludwigshafen, GERMANY

Please check the appropriate assignee category or categories (will not be printed on the patent) : 🚨 Individual 🚨 Corporation or other private group entity 🚨 Government

4a. The following fee(s) are submitted:

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 15-0030 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status.

□ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g/x).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United/stater [gena du/Tradepark Office].

Authorized Signatus

Authorized Signatus

James H. Knebe!

Augustation No. 22,630

This collection of information is required by 37 CFR [31]. The information is required to obtain or retain a benefit by the public which is to file (and by the USFTO to process) an application. Confloration by a supervisor of the public which is to file (and by the USFTO to process) an application. Confloration of the public which is to file (and by the USFTO to process) an application. Confloration of the public which is to file (and by the USFTO to process) an application. Confloration of the public which is to the Public of the Public of the USFTO to the USFTO to the Public of the USFTO to the USF

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